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March 17, 2004

By Federal Express

Docket Manager Tennessee Regulatory Authority 460 James Robertson Parkway Nashville, Tennessee 37243-0505

Re

Docket No 04-00052: Application To Provide Competing Local Telecommunications

Dear Sir or Madam:

The Utilities Commission, New Smyrna Beach d/b/a Sparks Communications ("UCNSB") hereby amends and supplements its Application in the above-referenced docket to provide a copy of UCNSB's Certificate of Authority issued by the Tennessee Secretary of State

I am enclosing herewith an original and thirteen (13) copies of this letter amending the Application. Please date stamp the "Stamp In" copy of this filing and return it to me in the enclosed prepaid, self-addressed Federal Express envelope. Thank you very much, and please contact me if you have any questions or require any further information.

Very truly yours,

Julie Kaminski Colsig

Enclosures

Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

DATE: 03/08/04 REQUEST NUMBER: 5059-0251 TELEPHONE CONTACT: (615) 741-2286 FILE DATE/TIME: 03/08/04 1023 EFFECTIVE DATE/TIME: 03/08/04 1023 CONTROL NUMBER: 0464864

DAVIS WRIGHT TREMAINE LLP (JULIE CORSIG) SUITE 450 1500 K STREET NW WASHINGTON, DC 20005-1272

TILITIES COMMISSION, NEW SMYRNA BEACH APPLICATION FOR CERTIFICATE OF AUTHORITY -FOR PROFIT

WELCOME TO THE STATE OF TENNESSEE. THE ATTACHED CERTIFICATE OF AUTHORITY HAS BEEN FILED WITH AN EFFECTIVE DATE AS INDICATED ABOVE.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DATE OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE CORPORATION'S FISCAL YEAR. PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION OF THE CORPORATION'S FISCAL YEAR. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE CORPORATION AT THE ADDRESS OF ITS PRINCIPAL OFFICE OR TO A MAILING ADDRESS PROVIDED TO THIS OFFICE IN WRITING. FAILURE TO FILE THIS REPORT OR TO MAINTAIN A REGISTERED AGENT AND OFFICE WILL SUBJECT THE CORPORATION TO ADMINISTRATIVE REVOCATION OF ITS CERTIFICATE OF AUTHORITY.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE.

FOR: APPLICATION FOR CERTIFICATE OF AUTHORITY - FOR PROFIT

ON DATE: 03/08/04

RECEIVED:

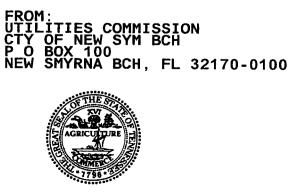
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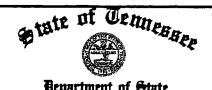
TOTAL PAYMENT RECEIVED:

\$600.00

RECEIPT NUMBER: 00003444922 ACCOUNT NUMBER: 00449124



RILEY C DARNELL SECRETARY OF STATE 化克尔斯 医二进行 经证券帐户



APPLICATION FOR CERTIFICATE OF AUTHORITY (FOR PROFIT)

STATE OF Only :

2004 MAR -8 AM 10:

SECRETARY OF STATE

Corporate Filings
312 Eighth Avenue North
6th Floor, William R Snodgrass Tower
Nashville, TN 37243

Pursuant to the provisions of Section 48-25-103 of thereby applies for a certificate of authority to transact business.	he Tennessee Business Corporation Act, the undersigned corporation ness in the State of Tennessee, and for that purpose sets forth:
The name of the corporation is <u>Utilities Cor</u> *If different, the name under which the certificate of auth	
name does not comply with the requirements of Section 48-1	may not issue a certificate of authority to a foreign corporation for profit if its 14-101 of the Tennessee Business Corporation Act *If obtaining a certificate in for registration of an assumed corporate name must be filed pursuant to
2. The state or country under whose law it is incorporate	dıs <u>Florida</u>
The date of its incorporation isOctober 2, 19 if other than perpetual, is	(must be month, day, and year), and the period of duration,
4. The complete street address (including zip code) of its 200 Canal Street, New Smyrna Beach, F Street	
5. The complete street address (including the county and the registered agent is 530 Gay Street, Suite 600, Knoxville, Street City Registered Agent CT Corporation - Lynch P	State/County Zip Code
6 The names and complete business addresses (including See attached Exhibit A	ng zip code) of its current officers are: (Attach separate sheet if necessary)
7. The names and complete business addresses (including necessary) See attached Exhibit A	ng zip code) of its current board of directors are (Attach separate sheet if
8. If the corporation commenced doing business in Tennes (month, day and year) $\frac{N/A}{}$	ssee prior to the approval of this application, the date of commencement
9. The corporation is a corporation for profit.	
	he Secretary of State, the delayed effective date/time is ate),(time).
[NOTE: A delayed effective date shall not be later than the 90th	th day after the date this document is filed by the Secretary of State]
Secretary of State or other official having custody of comora	te of existence (or a document of similar import) duly authenticated by the te records in the state or country under whose law it is incorporated. The nor to the date the application is filed in this state] See Exhibit B.
March 5, 2004 Signature Date	Utilities Commission, New Smyrna Beach Name of Corporation
Counsel	Julie & Casy
Signer's Capacity	Signature Julie K. Corsig
SS-4431 (Rev 4/01) Filing Fee \$600	Name (typed or printed) RDA 1678